

PART B—ISSUE FEE TRANSMITTAL

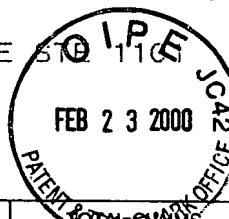
Complete and mail this form, together with applicable fees, to: Box ISSUE FEE
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CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

DELLETT AND WALTERS
310 S W FOURTH AVENUE
PORTLAND OR 97204

PM82/1122

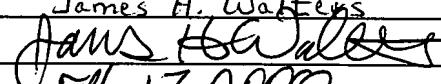


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Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

James H. Walters (Depositor's name)


(Signature)

Feb 17, 2000 (Date)

APPLICATION NO.	FILING DATE	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/925,920	09/09/97	015 STRIMBU, G	3634 11/22/99
First Named Applicant	REEVES,	35 USC 154(b) term ext. =	0 Days.

TITLE OF INVENTION WHEEL RETENTION DEVICE WITH EXTERNALLY ROTATABLE MULTI-FACETED RETENTION RING (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
3 S-307	211-020.000	E65	UTILITY	YES	\$605.00	02/22/00

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 DELLETT AND WALTERS

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Sportworks Northwest, Inc.

(B) RESIDENCE: (CITY & STATE OR COUNTRY) Woodinville, Washington

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee

Advance Order - # of Copies _____

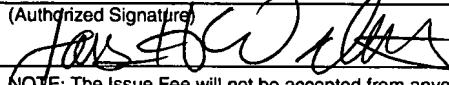
4b. The following fees or deficiency in these fees should be charged to:

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) 

(Date)

Reg. No. 35731

2-17-2000

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